**Important reminder: COVID-19 is an evolving situation; the comfort level of staff and students may change. Please ensure all lab members are aware they may change their decision to work onsite conducting research activities.**

This information can also be found on the [CAIR website.](https://cumming.ucalgary.ca/research/child-adolescent-imaging/relaunch-stage-2-information)

**Update to COVID-19 safety and scanning rules.**  
*As of September 1, the following updates to our COVID safety procedures will be made:*

* *Staff and students working in the MR area must follow the U of C*[*COVIDSafe Campus*](https://www.ucalgary.ca/risk/emergency-management/covid-19-response/covidsafe-campus)*strategy, including the rapid testing and vaccine status program.*
* *the 30-minute gaps between scan sessions will no longer be required, and back-to-back scans are permitted.*
* *no COVID screening form required in DI, with the understanding that the public are screened at the main entrance. Staff should continue to use the “fit for work” questionnaire.*
* *resumption of use of MR lockers for participant clothing instead of the plastic bags.*

*Reminders:*

* *masks required in all clinical areas, e.g. MR area.*
* *maintain high-level of hygiene in the MR area, including use of headset ear covers and extra cleaning.*
* *waiting area is the original (MRI/CT) area beside the change room / lockers.*
* *no face shield or goggles required for fully vaccinated staff.*
* *During preliminary pre-screening phone call, the participant and guardian(s) should be screened for COVID-19 symptoms or exposure. Final screening is at main entrance by AHS staff.*

*These procedures are contingent on University and AHS guidance and will be altered as the situation and guidance changes.*

**Further Regulations for Research Activities at the MR Centre**

*If studies meet the above-mentioned criteria, they must still adhere to the following regulations.*

***COVID screening and advanced preparation (DI & Mock Scanner access)***

* Research assistant calls participant prior to scan to confirm process of entering the hospital with participant as well as completes AHS DI outpatient screening protocol for symptoms or exposure to COVID-19.
* Consent and assent forms must be modified to advise participants of risk and COVID exposure.
  + High Field Development Program Consent Forms have been modified to reflect COVID exposure and risk and have received CHREB approval. [Adult Consent Form (DOC)](https://cumming.ucalgary.ca/sites/default/files/teams/137/Adult_Consent_Development_sep2020_clean.docx) | [Parent Consent Form (DOC](https://cumming.ucalgary.ca/sites/default/files/teams/137/Parent%20Consent%20Form_Development_sep2020_clean.docx))
* Email the list of participants that will be on-site the day before their arrival to the following individuals – their names will be available to screeners at the front doors.
  + Barbara Fox - Barbara.Fox@albertahealthservices.ca
  + Conny Betuzzi - Conny.Betuzzi@albertahealthservices.ca
  + Jill Woodward - Jill.Woodward@albertahealthservices.ca
* No COVID-19 positive patients permitted on research or mock scanner.
* Screening for COVID-19 / influenza as part of MR screening by means of a checklist. This should be part of phone screening prior to scan day.
* Research personnel must also use the [COVID-19 self-assessment tool](https://myhealth.alberta.ca/journey/covid-19/Pages/COVID-Self-Assessment.aspx) on the day of the session.
* Explain to participants/guardians in advance about our preparations and their assumed risks re COVID-19, using a standard disclosure.
  + The “Information for Families” page on the CAIR website now includes a COVID procedures section for families and participants.
  + [Example of risk disclosure script (DOC)](https://cumming.ucalgary.ca/sites/default/files/teams/137/COVID-%20Screening%20Script_0.docx)
* Immunocompromised or otherwise high-risk participants, as determined by the research facility medical director, would be considered ineligible to be scanned unless the visit was combined with a clinical visit and deemed clinical necessary for patient management.

***Participant interaction and procedure***

* *These points are summarized in a* [*COVID-19 Procedure Checklist PDF*](https://cumming.ucalgary.ca/sites/default/files/teams/137/COVID%20checklist.pdf)
* For all non-staff participants, researchers must use the AHS [“Patient and/or Accompanying Adult COVID-19 Transfer Risk Assessment Screening tool” (PDF)](https://cumming.ucalgary.ca/sites/default/files/teams/137/Covid%20screening%20form.pdf)
* Staff must record the date and arrival time of community members visiting ACH in a contact tracing log to be kept by the PI or staff delegate.
* Only the minimum number of people required to safely complete the study should be on site
* Please do not ask participants to arrive between 9-9.30 or 1-1.30 to avoid congestion at the main entrance.
* Ideally, researchers should meet participants near the admitting desk, so researchers don’t have to be re-screened.
* Face masks and appropriate hand hygiene is mandated for anyone entering the facility as per the AHS continuous masking policy.
* Cloth masks are acceptable until an AHS surgical/procedure mask is provided. Participants and families obtain these at front entrance screening
* When scanning is timed with visits to ACH for clinical care, researchers should attempt to escort participants within the hospital.

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| **3T** |
| * A member of the research team must meet participants at the main entrance, and escort them to the MR Centre. * Access to the MR Centre is through the Diagnostic Imaging main entrance. * Only one person in addition to the tech or operator should be in the console room. The console room has a suggested 4-person limit. * For gowning, participants will be provided disposable bag, and this is put under the desk in the control room to minimize contact with locker/lock. * Since lockers will not be in use, please request that all participants leave their valuables at home. * Participants can remove their masks when being positioned in the scanner and for the duration of the scan. A clean mask will be provided upon completion of the scan. * If participants prefer to be masked, then they may use the Vanch brand with nonmetallic nose bridge (see labelled box on control room desk.) * Researchers will maintain continuous masking * After the scan, research personnel must escort the participant to the changing room and then to the exit of ACH. |
| **Mock Scanner** |
| * A member of the research team must meet participants at the main entrance and escort them to the Mock Scanner room. * Mock scanner bookings do not have access to the MR area waiting room. * Participants, family members, and/or guardians must continue masking in the Mock Scanner room throughout the entire session. * After the session, research personnel must escort the participant to the exit of ACH. |

***Cleaning***

* Cleaning at end of every day of door handles, desks, workstations, control room, etc. in addition to routine cleaning procedures for MR scanner and facility. Appropriate cleaning of high contact areas between users (workstations, computers, etc.) also required.
* Cavi wipes should be used to disinfect surfaces and objects. If Cavi wipes are unavailable, Oxivir disinfectant (placed on dry wipes) can also be used.
* Any equipment that touches participants must follow strict cleaning procedures between participants.
* While MR Centre staff will perform disinfection of the area, including the changing room, it is the responsibility of research personnel to disinfect the waiting room between uses and keep all areas tidy and free of garbage.

***Staff and Students working on-site at ACH***

* AHS has advised the University of it’s Immunization of Workers for COVID-19 Policy which came into effect on September 14, 2021. The policy requires all employees, medical and midwifery staff, students, volunteers and contracted healthcare providers to be **fully immunized for COVID-19** by **November 30, 2021**.  This policy applies to all non-AHS employed researchers, including research coordinators, associates or research monitors, who require physical access to AHS facilities. Therefore, if any of your research staff are accessing AHS facilities, they must be fully vaccinated by November 30th. All fully-vaccinated students, staff and faculty must upload their proof of vaccination on the [Thrive Health Portal](https://www.ucalgary.ca/risk/emergency-management/covid-19-response/covidsafe-campus) immediately.
* Staff and students must ensure their visit is recorded by the PI or lab delegate for contact tracing purposes
  + [Contact tracing template (DOC)](https://cumming.ucalgary.ca/sites/default/files/teams/137/Tracking_Presence_TEMPLATE.xlsx)
* Before coming to ACH, each and every time you must complete the “Fit for Work” questionnaire. If you have AHS login credentials, use <https://www.ahs.ca/fitforwork> or follow the instructions in this [screening PDF.](https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-daily-fitness-for-work-screening-protocols.pdf)
* Students and postdocs must read and follow the UCalgary “Experiential Learning Guidelines.” (<https://live-risk.ucalgary.ca/risk/risk-management-insurance/services/experiential-learning>). All students must acknowledge the AHS and UCalgary guidelines, and consent to the arrangements. This should be done in writing/email to your supervisor.
* Staff **are not** permitted to use the main entrance. Staff must use the swipe card enabled entrance closest to their work area when entering and leaving the building.
* Staff should read the Return to Campus Guide for returning to on-site work as these principle for main campus should be generally followed.
* Staff and students must practice the continuous masking.
  + Please see the [Instructions (PDF](https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-hcw-masks.pdf)) for how to wear a mask, if you are unfamiliar
  + Cloth masks are acceptable until you can obtain an AHS provided mask. An AHS Mask is a surgical/procedure mask
* PIs/Managers should be made aware when you’re working outside a clinical area (e.g. 4th floor) and may schedule your access to limit persons on-site.
* Maintain 2 meter/ 6 ft distance between workers in all areas (e.g., 1 person per workstation).
* Take stairs instead of elevators when possible.
* Maintain distancing as much as possible when passing each other in hallway and common areas such as printers, stairs, and elevators.
* Avoid touching your face.

***Contact tracing***

* If a researcher, student or staff test for COVID-19, follow the instructions in [this document (PDF)](https://ucalgary.ca/paed/files/paed/staff-physician-positive-covid-test_dec2020.pdf)
  + In addition to the instructions provided in the AHS procedure please inform CAIR leadership, Signe Bray ([slbray@ucalgary.ca](mailto:slbray@ucalgary.ca)) and Perry Radau ([perry.radau1@ucalgary.ca](mailto:perry.radau1@ucalgary.ca))
* If a community volunteer tests positive for COVID-19, and was at ACH during their infectious window, the PI must immediately inform ACH Site Command Post [SCP.Calgary.ACH@ahs.ca](mailto:SCP.Calgary.ACH@ahs.ca), cc’ing [slbray@Ucalgary.ca](mailto:slbray@Ucalgary.ca) and [perrry.radau1@ucalgary.ca](mailto:perrry.radau1@ucalgary.ca).
  + Be sure to maintain confidentiality wherever possible and follow the instructions of the ACH Command Post
* Staff must use the swipe card enabled entrance closest to facilitate contact tracing if necessary
* It is the responsibility of the PI or their delegate to keep a log of staff and research participant visits to the site including arrival/departure date and time
  + [Contact tracing template (DOC)](https://cumming.ucalgary.ca/sites/default/files/teams/137/Tracking_Presence_TEMPLATE.xlsx)
* Each team must have the ability to track and contact staff/participants in the event of potential exposure to COVID-19.

***Infection control and prevention procedures***

* [Read more about AHS Interim IPC Recommendations during Covid-19](https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-emerging-issues-ncov.pdf)
* Researchers involved with scanning would need to be trained in the expected IPC procedures they need to follow.

*PPE*

* Eye protection (i.e. a face shield) is required for unvaccinated staff
  + Clean hands and put on mask before eye protection
  + must be changed or disinfected every time a mask is removed, or replaced
    - [Eye protection reuse/cleaning recommendations](https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-covid-ppe-eye-protecton-z0-emerging-issues.pdf)
* Please watch this [video](https://ahamms01.https.internapcdn.net/ahamms01/Content/AHS_Website/Information_For/if-hp-ipc-donning-and-doffing.mp4) covering hygiene, handwashing and PPE donning and doffing.
* Please read the [PPE FAQ (PDF).](https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-ppe-faq.pdf) Please also see additional [information](https://www.albertahealthservices.ca/topics/Page17048.aspx) about Personal Protective Equipment (PPE).

*Cleaning*

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